VanBilderbeek, B.H.

3672

First Named Inventor

Art Unit

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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(to be used for all correspondence after initial filing)

			Examiner Name	Jennifer	Jennifer H. Gay	
Total Number of Pages in This Submission 40			Attorney Docket Number	121947.0	121947.0010.004	
ENCLOSURES (check all that apply)						
Fee Transmittal Form		☐ Drawing(s)		After A	Allowance Communication to	
⊠ Fee Attached		Licensing-related Papers		1 —	I Communication to Board of als and Interferences	
Amendment / Reply		Petition			l Communication to Group al Notice, Brief, Reply Brief)	
After Final		Petition to Convert to a Provisional Application		Propri	etary Information	
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address		☐ Status	Letter	
Extension of Time Request		☐ Terminal Disclaimer		Other (please	Other Enclosure(s) (please identify below):	
Everence Abandanment Request		Request for Refund		Po	stcard	
Express Abandonment Request		CD, Nu	mber of CD(s)			
☐ Information Disclosure Statement						
Certified Copy of Priority Document(s)		Remarks				
Response to Missing Parts/ Incomplete Application						
Response to Missing Parts under 37 CFR 1.52 or 1.53						
	SIGNAT	URE OF A	THPLICANT, ATTORNEY,	R AGENT		
Firm Or Individual name Mark A. Tidwell, Feg. No. 21 A56 JACKSON VALKER L.V.P., 112 E. Pecan Speet, Suite 2106, Son Antonio, Texas 78205						
Signature ////////////////////////////////////						
Date April 25, 2005						
CERTIFICATE OF MAILING						
I hereby certify that thi with sufficient postage 22313-1450 on the da	e as first class mail in	eing facsimi an envelop	lle transmitted to the USPTO or one addressed to: Commissioner	deposited with for Patents, I	the United States Postal Service P.O. Box 1450, Alexandria, VA	
Typed or printed name Renee Treider						
Signature	Meni (Tue	X	Date	April 25, 2005	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL FOR FY 2005 Application Number 10/721,443					
FEE TRANSMITTAL For FY 2005 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 60.00 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 10-0096 Deposit Account Name: Jackson Walker L.L.P. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES Small Entity Application Type Fee (\$) Fee					
For FY 2005					
Examiner Name Jennifer H. Gay Art Unit 3672 Attorney Docket No. 121947.0010.0004 METHOD OF PAYMENT (check all that apply) W Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account, Number: 10-0096 Deposit Account Name: Jackson Walker L.L.P. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee W Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES Small Entity Small Entity Application Type Fee (s) Fee					
Art Unit 3672 TOTAL AMOUNT OF PAYMENT (\$\$) 60.00 Attorney Docket No. 121947.0010.0004 METHOD OF PAYMENT (check all that apply) V Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 10-0096 Deposit Account Name: Jackson Walker L.L.P. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee winder 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES Small Entity Application Type Fee (\$)					
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION FILING FEES Small Entity SEARCH FEES Small Entity EXAMINATION FEES Small Entity Fee (\$) Fee					
Second Provisional Provi					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES Small Entity Fee (\$) Fee (
Application Type					
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Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0					
Design 200 100 100 50 130 65					
Plant 200 100 300 150 160 80					
Reissue 300 150 500 250 600 300					
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2. EXCESS CLAIM FEES Fee Description Small Entity Fee (\$) Fee (\$)					
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Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues) 200 100					
Multiple dependent claims 360 180					
Total Claims					
20 or HP = x = Fee (\$) Fee Paid (\$)					
HP = highest number of total claims paid for, if greater than 20. Indep. Claims					
-3 or HP = x =					
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer					
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50					
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)					
100 = / 50 = (round up to a whole number) x =					
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discoupt) Fees Paid (\$)					
Other (e.g., late filing surcharge): Patition for one-Month Exception of Time Under 37 CFR 1.136(a) 60.00					
Other (e.g., rate fitting putchange). Petition for wone-informine program of Time Under 37 CFR 1.130(a) 00.00					
SUBMITTED BY Registration No. 37,456 Registration No. (Attorney/Agent)					

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APPL. NO.:

10/721,443

Art Unit: 3672

APPLICANT: VanBilerbeek, B.H.

EXAMINER: Jennifer H. Gay

FILED: November 24, 2003

ATTY DKT NO.: 121947.0010.004

TITLE: CLAMPING WELL CASINGS

TO:

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

LETTER TO OFFICIAL DRAFTSMAN

Dear Sir:

In response to the Office Action mailed January 11, 2005 and the Response to Office Action dated April 25, 2005, enclosed herewith are twenty (20) sheets of replacement drawings.

Please substitute the enclosed twenty replacement sheets submitted herewith in the above-referenced application.

Thank you for your kind attention to this matter.

Respectfully submitted,

Mark A. Tidwell

Attorney for Applicant

Reg. No. 37,456

Jackson Walker L.L.P. 112 E. Pecan Street, Suite 2100 San Antonio, Texas 78205 713-752-4578 Phone 713-752-4221 Fax



CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited on the date shown below with the United States Postal Service in an envelope addressed to the "Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, Mail Stop Response/FEE", as follows:

	37 CFR 1.8(a)	37 CFR 1.10
[X]	With sufficient postage as First Class Mail.	[] As "Express Mail Post Office to Addressee", Mailing Label No.
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	Date: April 25, 2005.	Date:, 20

Renee Treider

Printed Name of Person Mailing Paper or Fee

Signature of Person Mailing Paper or Fee